

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 106 16550

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			IND		DEP		IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP		
1	/						51												
2		/					52												
3		/					53												
4		/					54												
5	/						55												
6		/					56												
7		/					57												
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11	/	/					61												
12	X	X					62												
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42							92												
43							93												
44							94												
45							95												
46							96												
47							97												
48							98												
49							99												
50							100												
TOTAL IND.	9						TOTAL IND.												
TOTAL DEP.	18						TOTAL DEP.												
TOTAL CLAIMS	27						TOTAL CLAIMS												